

Towards Integrated Health in Ontario

Transformation Office Briefing
January 22, 2019

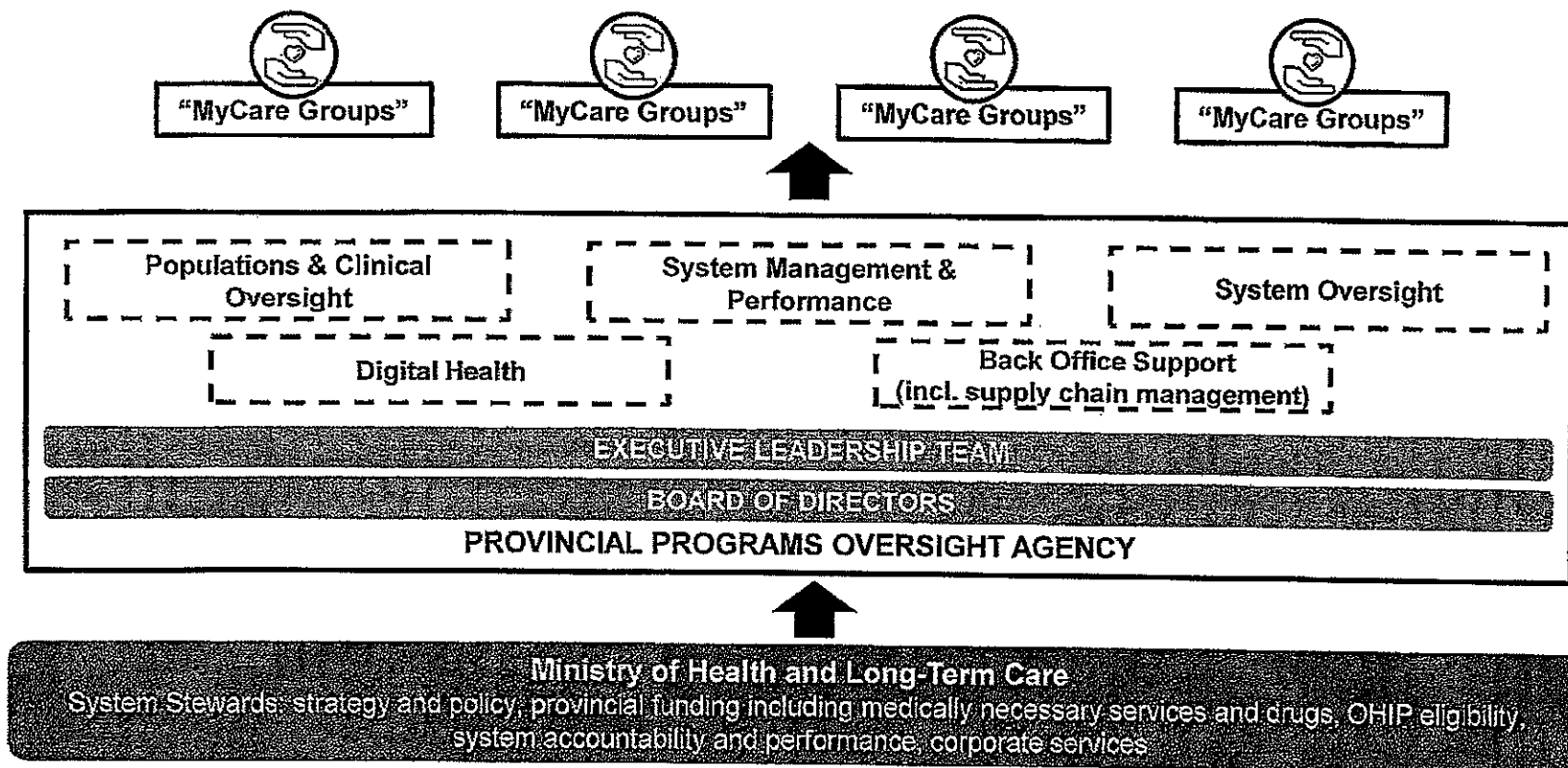
Agenda

Topic	Lead
1. Integrated Care Overview	Patrick D
2. MyCare Groups	Melissa F
3. Agency Oversight	Lynn G
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Transforming Health Care in Ontario

Ontario's health care system is on an unsustainable path. Transformation at all levels of health care delivery, including regional and provincial oversight, is required to address existing challenges and to ensure a sustainable system for future generations.

Integrated Care Delivery – Health Care for the People



Transformation Overview



The Ministry's Integrated Care proposal includes four complementary initiatives to address existing fragmentation in both direct care delivery and health system oversight and supports.

Locally Integrated Care Delivery

1. **MyCare Groups** - A new model of integrated care delivery to provide patients with seamless, coordinated care and a single team of providers for all their care needs.

Provincial System Oversight and Supports

2. **Agency Oversight** – A new oversight agency to provide a centralized point of governance, accountability and oversight for the health care system and to improve clinical guidance and support for providers and enable better quality care for patients.
3. **Digital First for Health** – A new approach to empower patients with digital choices in accessing health care and to streamline digital health delivery to increase system efficiency, improve integration and better meet the needs of both patients and providers.
4. **Modernized Health Care Supply Chain Management** – A new, integrated system for supply chain management to ensure that supplies and services can be sourced, procured and delivered seamlessly and quickly to providers and patients.

MyCare Groups

Patients, through my 'MyCare Groups' will experience seamless, coordinated care. Patients will have a single team of providers for all their care needs and will not experience gaps in service.

A 'MyCare Group' is a new model of integrated care delivery and funding where a group of providers (e.g., hospitals, physicians, etc.) are held clinically and fiscally accountable for delivering a coordinated continuum of care to a defined geographic population or patient segment.

MyCare Groups will seek to achieve the following results



Better Patient & Caregiver Experience (e.g., greater access to care and more virtual options)



Better Population & Patient Health Outcomes (e.g., improved chronic disease management and prevention)



Improved Value & Efficiency (e.g., reduced hospital utilization, duplication and total cost of care)



Better Provider Experience (e.g., increased communication, information sharing)

At maturity, 30-50 MyCare Groups across the province with the following key features

- ☒ Care for a **defined patient population/geography**
- ☒ Comprehensive **continuum of care** by multiple health professionals, including all care settings
- ☒ **Single point** of clinical and fiscal accountability; **leadership** capacity for high-quality care and to manage relationships and obligations
- ☒ **Single budget** based on an **outcome-based** blended funding model designed to drive access, efficiency, effectiveness, and equity
- ☒ Defined **performance** model that allows for **risk and gain** sharing (may keep savings if targets met); performance **publicly reported**
- ☒ Communication and **information-sharing** (e.g., shared patient records among all care providers and patients themselves)
- ☒ **Virtual care** in place that gives patients digital choices such as video visits and digital access to patient health records

To inform the model development, in-depth consultations are underway with the Premier's Council on Improving Healthcare and Ending Halfway and each of its sub councils and the Minister's Patient and Family Advisory Council.

Agency Oversight – Outcomes & Principles

To support transformation, the Ministry engaged an external vendor in December 2018 to undertake a review of potential models to modernize health system oversight to enable integrated care delivery. The vendor identified the two key outcomes for and seven guiding principles for transformation.

Desired Outcomes

- ✓ **Achieve the quadruple aim** – better patient and provider experience, better population and patient health outcomes, and improve value and efficiency.
- ✓ **Achieve financial savings** – a deliberate focus on reductions in expenditure and the reinvestment in frontline care.

Guiding Principles

1. **Focus on consumer, partners, and stakeholders:** the design of the new oversight agency enables a system focus on the needs of consumers/ patients, partners, and stakeholders.
2. **Create enabling partnerships:** the new agency has competency and capacity to effectively partner with public and private sector entities working together to achieve the Quadruple Aim.
3. **Eliminate redundancies:** the new agency structure enables a system that ensures alignment between and eliminates duplication among parties.
4. **Clearly define roles, powers and autonomy:** the new oversight structure aligns to clearly defined roles, powers, and autonomy between the new agency and the Ministry.
5. **Focus on system performance and improvement:** build a defined capability and competency in standard-setting, monitoring, and evaluation to ensure the system is always improving.
6. **Enable execution of strategic priorities and effective decision-making:** ensure that the new structure and governance support the successful execution of strategy and timely decision making.
7. **Agile and responsive:** the new agency structure is designed to be agile to ensure flexibility and responsiveness to emerging technologies, evidence and practices of high performing health systems.

Agency Oversight - Functions

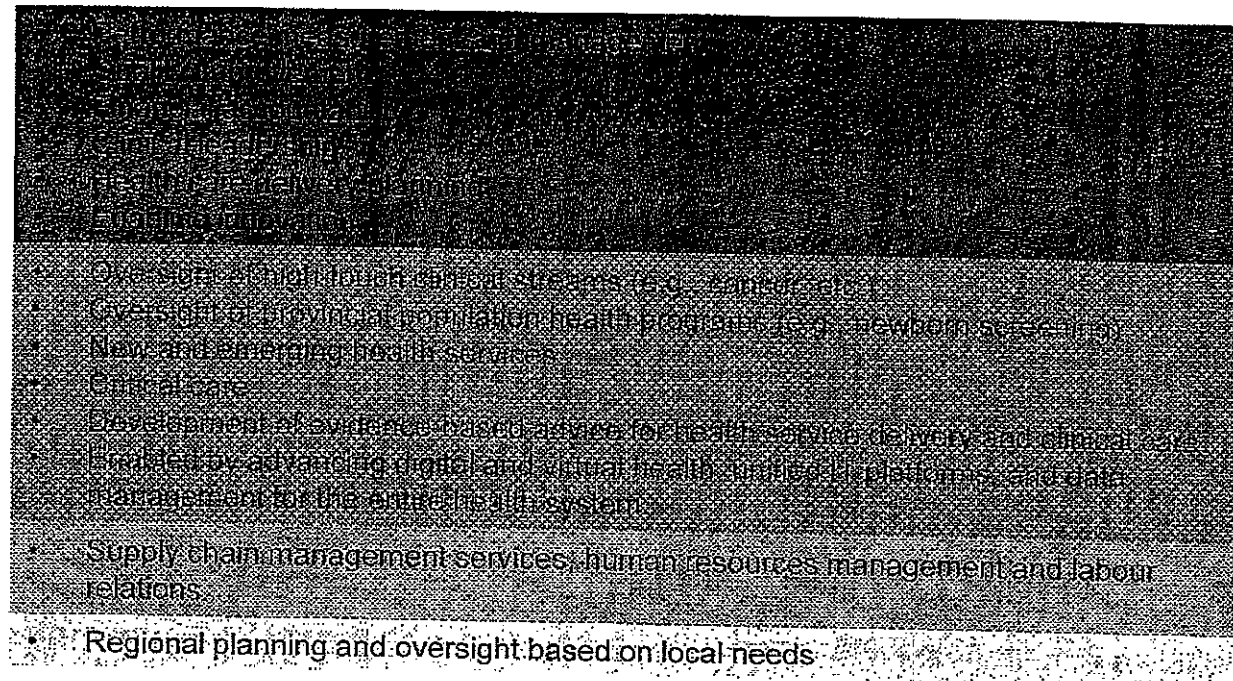
The Ministry proposes to eliminate and replace 20 existing operational agencies with one new consolidated provincial Agency that fully integrates the following four critical functions:

SYSTEM MANAGEMENT AND PERFORMANCE

POPULATIONS-BASED PROGRAMS AND CLINICAL AND QUALITY STANDARDS

BACK OFFICE SUPPORT

SYSTEM OVERSIGHT







The new Agency would:

- Enhance the consistency of health care delivery across the province and enable nimble responsiveness to provincial direction;
- Ensure a uniform approach to integrating care to improve the patient experience;
- Centralize and create a single point of accountability for clinical quality and oversight;
- Streamline and improve clinical guidance and support for providers; and
- Improve overall system efficiency by eliminating duplicative back office infrastructure and functions.

Digital First for Health

In line with key recommendations from the **line-by-line review conducted by Ernst & Young**, Digital First for Health would take into account the fact that **Ontarians expect a more modern, digitally-integrated health system** that is more efficient and offers Ontarians more choice in how they interact with their health system.

To enable MyCare Groups, the ministry proposes to undertake a Digital First for Health strategy that will:

-  1. **Empower patients with digital choices** in how they access care and engage in their health. This will include more convenient, modern options for virtual care and expanded digital access for Ontarians to their health records.
-  2. **Equip frontline providers** with the tools and information they need to deliver the best care to patients. Consolidating the fragmented services currently available to providers, such as eReferral and eConsult, and streamlining local point of care systems will be key aspects of this approach.
-  3. **Enable the health system to operate more efficiently** by providing the data, analytics capabilities and other supports needed to improve planning, population health and identify opportunities to be more efficient.
-  4. **Streamline digital health delivery** to increase efficiency, improve integration and better meet the needs of patients and frontline providers. Digital delivery partners and programs would be re-organized in line with the new agency oversight structure described.

The ministry's approach to Digital First for Health will improve on past digital strategies. Consistent with a strong stewardship role, the ministry will embed digital first thinking into the business of health care delivery, set clear objectives for the new agency, and establish policies and standards that foster innovation, integration and efficiency.

Modernized Supply Chain Management

The Ministry proposes to implement a new supply chain management model where all health sector supply chain management functions and features are incorporated into the proposed new Agency. The new model would achieve the following key objectives:

1. **Improve the quality of care Ontarians receive** by engaging clinicians and patients in the procurement of products and services that deliver the best patient outcomes.
2. **Save money** through consolidation of contracts and aggregation of spend across vendors (on behalf of hospitals, long-term care, home and community care, LHINs and other health service providers).
3. **Make procurement efficient** through a lean, agile and digital supply chain that reduces red tape while providing excellent service to buyers and vendors.
4. **Drive innovation** by implementing effective supply chain management practices to achieve and generate economies of scale and the shift to strategic value-based procurement.
5. **Centralize procurement data** to identify areas to better manage spend that:
 - Ensure thorough spend analysis, data extraction, reporting and predictive analytics; and,
 - Ensure point of use for recording product usage per patient and procedure, linking product consumption and clinical procedure performance to the patient's medical record.
6. **Encourage competition** by respecting trade agreements while encouraging participation across the broad vendor community to continually maintain a downward pressure on costs.

Managing Transformation – System Roles & Responsibilities

To ensure successful implementation and that a comprehensive approach is taken to manage the proposed transformation, the Ministry proposes clearly defined roles and responsibilities for the health system.

FUNCTION	MOHLTC	AGENCY	MyCare Groups (MCGs)
Strategy	Responsible for population health and health system strategy and choice of levers (policy, funding, legislative, regulatory)	Responsible for business plans to implement the MOHLTC health system strategy	Prepare operational plans on an annual and multiyear basis
Planning including Capacity Planning	What: MOHLTC approves capacity model and determines funding commitment and the outcomes (results); may create tools and models	How: The Agency develops a capacity model for use by MOHLTC, and develops operational plans	Do: MCGs develop operational plans within their mandate
Policy Development	Develops strategic population and health system policies and targets	Develops program models and policies	Implements based on local needs and infrastructure
Funding Models	Develops integrated funding framework and allocations	Provides advice on funding models and negotiates contracts with the MCGs	Makes operational funding decisions to meet local targets for improvement and volumes
Performance Measurement	Sets high-level performance expectations and policies	Develops quality and performance standards Measures quality and performance of MCGs and system	Follows agreement with the agency Oversees local performance of service providers
Performance Management	MOHLTC provides an audit function and measures to hold the Agency accountable	Monitors and manages performance of the system (including MCGs)	Manages performance to meet standards

Managing Transformation – System Roles & Responsibilities

FUNCTION	MOHLTC	AGENCY	MyCare Groups (MCGs)
Information Management, Data and Analytics	<ul style="list-style-type: none"> Develops data strategy and sharing framework Defines data standards and authoritative data Has analytics capacity to fulfill its role 	<ul style="list-style-type: none"> May or may not hold the Health data assets Has analytics capacity to fulfill its role Will operate the data systems 	<ul style="list-style-type: none"> Accesses health data assets to fulfill its role
Digital Health	<ul style="list-style-type: none"> Develops digital health strategy 	<ul style="list-style-type: none"> Implements digital health strategy and operates digital health services needed at provincial scale 	<ul style="list-style-type: none"> Applies digital first approaches for better health services and patient outcomes
Health Capital Investment	<ul style="list-style-type: none"> Prioritizes capital projects and secures gov't approval Involved in the larger budget decisions Holds the capital plan 	<ul style="list-style-type: none"> Recommends and endorses capital investments to the government 	<ul style="list-style-type: none"> Builds and maintains capital investments
Communications	<ul style="list-style-type: none"> Responsible for all public communication including health promotion/ prevention and social marketing 	<ul style="list-style-type: none"> Communicates with stakeholders re KTE and system performance according to protocols 	<ul style="list-style-type: none"> Communicates with individual patients re care and its role and performance as an independent organization
Issues Management	<ul style="list-style-type: none"> Determines protocols for issues mgmt. 	<ul style="list-style-type: none"> Manages system issues in collaboration with MOHLTC 	<ul style="list-style-type: none"> Alerts Agency to issues Assists in issue management

Managing Transformation – System Roles & Responsibilities

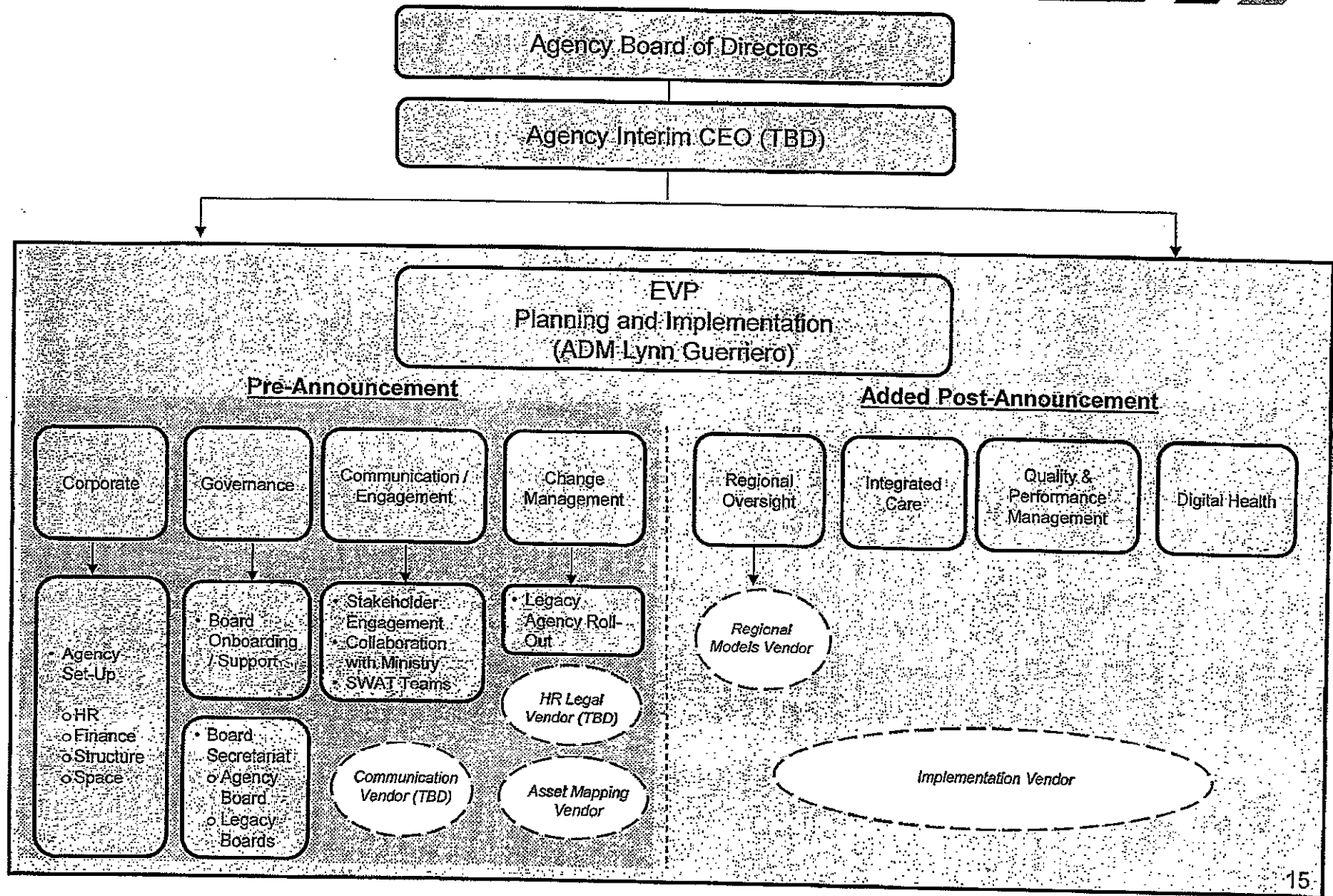
FUNCTION	MCHLTC	AGENCY	MyCare Groups (MCGs)
Patient and Family Engagement	Has systems and processes relevant to its role and functions	Has systems and processes relevant to its role and functions	Has systems and processes for its role and functions
Health Promotion	Defines population health targets Develops healthy public policy Manages public education	Incorporates health promotion and secondary prevention policy, as defined by the ministry, in program development and quality measures	Incorporates health promotion and secondary prevention in program delivery
Emergency Response	Defines process, protocols and roles	Establishes preventive measures and supports response	Supports and manages local response
Human Resources	Factored into the population health and health system strategies and plans Enables solutions to address crises	Identifies issues and provides recommendations	Employs and manages staff

Next Steps

- Seek necessary TB/MBC and LRC approval for full integrated health care proposal:
 - TB/MBC February 2019
 - LRC – February 2019
 - Cabinet – February 2019
- Minister launches transformation plan (February 2019)
- Introduce legislation for integrated health care proposal (February 2019)
- Launch Expression of Interest for MyCare Groups (March 2019)
- Enabling integrated care legislation is proclaimed (July 1st, 2019)

Appendices

Agency Implementation Team



Agency Implementation Roles & Responsibilities

Work Stream	Agency Implementation Secretariat (MOHLTC)	Agency Implementation Team
Human Resources	<ul style="list-style-type: none"> • Short-List of Interim CEOs • Set Broader Public Sector Executive Compensation Structure • Board Recruitment • Internal Staffing Plans • Labour/Union Negotiations 	<ul style="list-style-type: none"> • Recruit Executive Team • Create Organizational Structure • Pay/Benefit Structure • HR/Staffing Plans • Recruit/Hire Staff
Finance	<ul style="list-style-type: none"> • Set Agency Budget • Set Funding Schedule and Cash Flows 	<ul style="list-style-type: none"> • Determine Financial System to be Used • Register Agency with CRA (Business #) • Establish Bank Accounts • Set Delegation of Authority • Set Chart of Accounts • Arrange for Travel and Purchasing Cards • Develop Out of Country, Out of Province, Meals & Directive Policies
Legal	<ul style="list-style-type: none"> • Legislative Changes • Incorporation/Letters of Patent • OICs/Revocation of OICs • Transfer Letters • Memorandum of Understanding • Regulation Changes • Legislation Repeals • Ongoing Legal Advice 	<ul style="list-style-type: none"> • Draft Corporate By-Laws • Develop Privacy Protocols • Create Conflict of Interest Executives • Code of Conduct/Ethics

Agency Implementation Roles & Responsibilities

Work Stream	Agency Implementation Secretariat (MOHLTC)	Agency Implementation Team
Procurement/ Logistics	<ul style="list-style-type: none"> • Vendor Management/Procurement <ul style="list-style-type: none"> ◦ Implementation Planning ◦ Board Recruitment ◦ Asset Mapping ◦ Stakeholder Engagement ◦ Regional Model • Interim Office Space 	<ul style="list-style-type: none"> • Long-Term Office Space • Capital Infrastructure (furniture, computers, etc.) • Management Consultants
Communications	<ul style="list-style-type: none"> • Announcement • Internal & External Communication Plan • Ministry Website • Stakeholder Engagement 	<ul style="list-style-type: none"> • Corporate Identity • Website Development (domain name) • Communication Strategy and Plans • Stakeholder Engagement
Governance/ Accountability	<ul style="list-style-type: none"> • Mandate Letter • Accountability Agreement • Reporting Requirements • Evaluation (criteria development and measurement) 	<ul style="list-style-type: none"> • Public Reporting • BPSA Compliance • Ministry Reporting • Performance monitoring
Operations	<ul style="list-style-type: none"> • Implementation Secretariat Office Set-Up (space, staff, equipment, etc.) • Transition Management • Asset Mapping • Transfer of Functions/Programs • Agency Wind-Down 	<ul style="list-style-type: none"> • Office Set-Up/Access • Digital Integration • Regional Oversight Transition • Transfer of Functions/Programs